

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JIM COSTA FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Pamela Kallsen

Mailing Address 1811 N. Langley Avenue

City	State	Zip Code
Clovis	CA	93619

FEC ID number of contributing federal political committee.

C

Name of Employer
Marjaree Mason CenterOccupation
Executive Director

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2014

Transaction ID : SA11AI.8203

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. M.D. Robert H. Kezirian

Mailing Address 2124 West Rue St. Michel

City	State	Zip Code
Fresno	CA	93711

FEC ID number of contributing federal political committee.

C

Name of Employer
Childrens HospitalOccupation
Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Transaction ID : SA11AI.8063

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

C. Sherrel Kirk

Mailing Address 23765 McKean Road

City	State	Zip Code
San Jose	CA	95141

FEC ID number of contributing federal political committee.

C

Name of Employer
Self EmployedOccupation
General Contractor

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8378

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1550.00